PAGE 1 / 31

FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

10111110	For An Autho	e Use Only			
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼		nple: If typing, type the lines.	12FE4M5	
Kleinhendler For Con	gress		1		
	1 1 1 1 1 1 1				
ADDRESS (number and street)	PO Box 1692				
▼					
Check if different than previously reported. (ACC)	Brick			NJ 087	23
	NUMBED W	CITY A		STATE A	ZIP CODE ▲
C C00554311	3.	IS THIS REPORT	NEW (N) OR	AMENDED (A)	STATE ▼ DISTRICT
4. TYPE OF REPORT (Control of the control of the co	(b) y Report (Q1) Report (Q2) terly Report (Q3)	Election on	Primary (12P) Convention (12C) Election Report for	General (12G) Special (12S)	Runoff (12R) in the State of
	(6)		General (30G)	Runoff (30R)	Special (30S)
X Termination Repo	ort (TER)	Election on	M M / D D	/ Y " Y " Y	in the State of
5. Covering Period	01 / 01 / Y	y y y y 2021	through	01 / D D / Y	Y Y Y 2021
I certify that I have examined Type or Print Name of Treasu	Kleinhendler, Howa		vledge and belief it	is true, correct and co	mplete.
Signature of Treasurer	leinhendler, Howard, , ,	[]	Electronically Filed]	Date 01	28 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of false, erro	oneous, or incomplete info	ormation may sul	oject the person sign	ning this Report to the po	enalties of 52 U.S.C. §30109
Office Use Only					FEC FORM 3 (Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

PAGE 2 / 31

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name Kleinhendler For Congress

2021 2021 01 28 01 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 600.00 4631.81 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) (c) Net Contributions (other than loans) 600.00 4631.81 (subtract Line 6(b) from Line 6(a)) Net Operating Expenditures (a) Total Operating Expenditures 600.00 75260.53 (from Line 17) (b) Total Offsets to Operating 608.33 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 600.00 74652.20 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 0.00 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D).....

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 05/2016)

PAGE 3 / 31

Write or Type Committee Name

01 01 2021 01 28 2021 Report Covering the Period: From: To:

	I. RECEIPTS	I. RECEIPTS COLUMN A Total This Period		
1.	CONTRIBUTIONS (other than loans) FROM:			
	(a) Individuals/Persons Other Than Political Committees			
	(i) Itemized (use Schedule A)	0.00	3579.00	
	(ii) Unitemized	0.00	100.00	
	(iii) TOTAL of contributions from individuals	0.00	3679.00	
	(b) Political Party Committees	0.00	0.00	
	(c) Other Political Committees (such as PACs)	0.00	0.00	
	(d) The Candidate(e) TOTAL CONTRIBUTIONS	600.00	952.81	
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	600.00	4631.81	
2.	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00	
3.	LOANS:			
	(a) Made or Guaranteed by the Candidate	0.00	70010.00	
	(b) All Other Loans	0.00	0.00	
	(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	70010.00	
4.	OFFSETS TO OPERATING			
	EXPENDITURES (Refunds, Rebates, etc.)	0.00	608.33	
5.	OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	88.00	
6.	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15)			
	(Carry Total to Line 24, page 4)	600.00	75338.14	

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 05/2016)

rsements PAGE 4 / 31

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	600.00	75260.53
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19.	LOAN REPAYMENTS:		
	(a) Of Loans Made or Guaranteed by the Candidate	77.61	77.61
	(b) Of All Other Loans	0.00	0.00
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	77.61	77.61
20.	REFUNDS OF CONTRIBUTIONS TO:		
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
		0.00	0.00
	(b) Political Party Committees(c) Other Political Committees	7 7 7	
	(such as PACs)	0.00	0.00
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
21.	OTHER DISBURSEMENTS	0.00	0.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	677.61	75338.14
	III. CASH SU	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	77.61
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	600.00
25.	SUBTOTAL (add Line 23 and Line 24)		677.61
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	677.61
27.	CASH ON HAND AT CLOSE OF REPORTING (subtract Line 26 from Line 25)		0.00

SCHEDULE A (FEC Form 3)

PAGE OF FOR LINE NUMBER: 31 Use separate schedule(s) (check only one) for each category of the ITEMIZED RECEIPTS 11a **x** 11d 11b 11c **Detailed Summary Page** 12 13a 13b Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Kleinhendler For Congress Full Name (Last, First, Middle Initial) Kleinhendler, Howard, , , Date of Receipt Mailing Address 8 Cabinfield Circle 26 City State Zip Code Transaction ID: SA11D.4393 NJ 08701 Lakewood FEC ID number of contributing Amount of Each Receipt this Period H4NJ03114 federal political committee. 600.00 Occupation Name of Employer Wachtel Missry LLP Attorney Memo Item Receipt For: 2014 Election Cycle-to-Date In-kind - Compliance Services **x** Primary General 72041.81 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Memo Item Receipt For: Election Cycle-to-Date Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Memo Item Receipt For: Election Cycle-to-Date Primary General Other (specify)

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

600.00

600.00

SCHEDULE B (FEC Form 3)

PAGE 6 31 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **x** 17 18 19a Detailed Summary Page 20b 20c

ITEMIZED DISBURSEMENTS 19b 20a 21 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Kleinhendler For Congress Full Name (Last, First, Middle Initial) Date of Disbursement A. Kleinhendler, Howard, , , 2021 Mailing Address 8 Cabinfield Circle City State Zip Code **FEC Identification Number** NJ Lakewood 08701 Purpose of Disbursement In-kind - Compliance Services H4NJ03114 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2014 600.00 Office Sought: House Senate Primary General Transaction ID: SB17.4394 Other (specify) President Memo Item NJ State: District: Full Name (Last, First, Middle Initial) Date of Disbursement В. Mailing Address City State Zip Code **FEC Identification Number** Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: Office Sought: House Senate Primary General Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Mailing Address City State Zip Code **FEC Identification Number** Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 600.00 TOTAL This Period (last page this line number only)..... 600.00

PAGE 7 31 FOR LINE NUMBER: SCHEDULE B (FEC Form 3) Use separate schedule(s) (check only one) for each category of the ITEMIZED DISBURSEMENTS 17 **X** 19a 19b 18 Detailed Summary Page 20a 20b 20c 21 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Kleinhendler For Congress Full Name (Last, First, Middle Initial) Date of Disbursement A. Kleinhendler, Howard, , , 2021 Mailing Address 8 Cabinfield Circle State City Zip Code **FEC Identification Number** NJ Lakewood 08701 Purpose of Disbursement Loan Repayment H4NJ03114 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2014 Office Sought: House 77.61 Senate Primary General Transaction ID: SB19A.4401 Other (specify) President Memo Item NJ State: District: Full Name (Last, First, Middle Initial) Date of Disbursement В. Mailing Address City State Zip Code **FEC Identification Number** Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: Office Sought: House Senate Primary General Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Mailing Address City State Zip Code **FEC Identification Number** Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 77.61

TOTAL This Period (last page this line number only).....

77.61

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 8

13a 13b

OF

		130
NAME OF COMMITTEE (In Full) Kleinhendler For Congress		Transaction ID : SC/10.4104
LOAN SOURCE Full Name (Last, First, Mid Kleinhendler, Howard, , ,	ddle Initial)	☐ Memo Item Election: 2014 ▼ Primary
Mailing Address 8 Cabinfield Circle		General Other (specify) ▼
City	State	ZIP Code ** Personal Funds of the Candidate
Lakewood	NJ	08701 Personal Funds of the Candidate
Original Amount of Loan	Cumulative Pay	ment To Date Balance Outstanding at Close of This Period
1000.00	7	77.61 0.00
TERMS Date Incurred	D	ate Due Interest Rate Secured: (If none, enter 0)
M01M / D06D / Y Ž01Ă Y	M M / D D	√11/30/2ŏ14 ^Y 0.00 % (apr) Yes 🗶 No
List All Endorsers or Guarantors (if any) t	o Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	1	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	•	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional).		0.00
TOTALS This Period (last page in this line only	/)	······
Carry outstanding balance only to LINE 3, Sci	nedule D, for this	line. If no Schedule D, carry forward to appropriate line of Summary.

: 97 'A = G7 9 @ G B9 CI G'H9 LH F9 @ 5 H9 8 'HC '5 'F9 DC FHZ G7 < 98 I @ 'C F' + H9 A = N5 H= C B

Form/Schedule: SC/10 Transaction ID: SC/10.4104

(Current loan amount of 922.39 from a balance of 922.39 has been forgiven)

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 10

13a 13b

OF

		130
NAME OF COMMITTEE (In Full) Kleinhendler For Congress		Transaction ID : SC/10.4106
LOAN SOURCE Full Name (Last, First, Kleinhendler, Howard, , ,	Middle Initial)	☐ Memo Item
Mailing Address 8 Cabinfield Circle		General Other (specify) ▼
City	State	ZIP Code Personal Funds of the Candidate
Lakewood	NJ	08701
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
50.00		0.00
TERMS Date Incurred	Г	Date Due Interest Rate Secured: (If none, enter 0)
M02M / D05D / Y 2014 Y	M M / D D	/
List All Endorsers or Guarantors (if an	y) to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	e ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	<u> </u>	Name of Employer
Mailing Address		Occupation
O't.	- 7ID O- 4-	Amount Guaranteed
City	e ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	e ZIP Code	Outstanding:
4. Full Name (Last, First, Middle Initial)	•	Name of Employer
Mailing Address		Occupation
0.1	710.0	Amount Guaranteed
City	e ZIP Code	Outstanding:
SUBTOTALS This Period This Page (option	nal)	
		, , , ,
TOTALS This Period (last page in this line	only)	————
Carry outstanding balance only to LINE 3,	Schedule D, for this	s line. If no Schedule D, carry forward to appropriate line of Summary.

: 97 'A = G7 9 @ G B9 CI G'H9 LH F9 @ 5 H9 8 'HC '5 'F9 DC FHZ G7 < 98 I @ 'C F' + H9 A = N5 H= C B

Form/Schedule: SC/10 Transaction ID: SC/10.4106

(Current loan amount of 50.00 from a balance of 50.00 has been forgiven)

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 12

13a

					,9-		13b
NAME OF COMMITTEE Kleinhendler For				Tı	ransaction	ID : SC/10.4108	
LOAN SOURCE E	ull Name (Last, First, Mic	ddla Initial)			Г	ation. 2244	
		due iriitiai)		☐ Memo		ection: 2014 Primary	
Kleinhendler, H	Howard, , ,				×	General	
Mailing Address 8 Cabinfield Circle						Other (specify)	,
		l -	I				
City		State	ZIP Code)			- () - O - (- (- (- (- (- (- (-
Lakewood	Lakewood NJ 08701				X	Personal Funds	of the Candidate
Original Amount of	Loan	Cumulative Pay	ment To D	ate	Balance	Outstanding at Clo	ose of This Period
7	10.00		7	0.00		, ,	0.00
TERMS Date	e Incurred	D	ate Due		st Rate e, enter 0)		Secured:
M02 ^M / D20 ^D	/ Y Ž014 Y	M M / D D	/ Y11/3	ś0/2Ŏ14 ^Y	0.00	% (apr)	Yes X No
List All Endorsers	or Guarantors (if any) t	o Loan Source					
1. Full Name (Last	, First, Middle Initial)			Name of Employer			
Mailing Address	Mailing Address						
				Amount			
City	State	ZIP Code		Guaranteed Outstanding:			
2. Full Name (Last,	2. Full Name (Last, First, Middle Initial)						
Mailing Address	Mailing Address						
				Amount			
City	State	ZIP Code		Guaranteed Outstanding:	7	7	4
3. Full Name (Last,	First, Middle Initial)		1	Name of Employer			
Mailing Address				Occupation			
				Amount			
City	State	ZIP Code		Guaranteed Outstanding:		,	
4. Full Name (Last,	First, Middle Initial)			Name of Employer			
Mailing Address		Occupation					
City	State	ZIP Code		Amount Guaranteed Outstanding:	,		
		1					
SUBTOTALS This Peri	iod This Page (optional)			·····•	1		0.00
TOTALS This Period (I	ast page in this line only	/)		>		7 7	
				0.1		1	
L Carry outstanding hal	ance only to LINE 3. Sch	nedule D. for this	s line. If no	Schedule D. car	rv torward	to appropriate li	ne of Summary

: 97 'A = G7 9 @ G B9 C I G'H9 L H'F9 @ 5 H98 'HC'5 'F9 DCF HZ'G7 < 98 I @ 'CF' ± H9 A ± N5 H± C B

Form/Schedule: SC/10 Transaction ID: SC/10.4108

(Current loan amount of 10.00 from a balance of 10.00 has been forgiven)

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE

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X 13a 13b

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Transaction ID: SC/10.4110 NAME OF COMMITTEE (In Full) Kleinhendler For Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Kleinhendler, Howard, , , General Mailing Address 8 Cabinfield Circle Other (specify) City State ZIP Code X Personal Funds of the Candidate NJ 08701 Lakewood Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 5000.00 0.00 0.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 ^D10^D M 03M ž014 ^Y 11/30/14 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 0.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

: 97 'A = G7 9 @ G B9 CI G'H9 LH F9 @ 5 H9 8 'HC '5 'F9 DC FHZ G7 < 98 I @ 'C F' + H9 A = N5 H= C B

Form/Schedule: SC/10 Transaction ID: SC/10.4110

(Current loan amount of 5000.00 from a balance of 5000.00 has been forgiven)

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 16

13a

OF

		130
NAME OF COMMITTEE (In Full) Kleinhendler For Congress		Transaction ID : SC/10.4111
LOAN SOURCE Full Name (Last, First, Mi	ddle Initial)	Memo Item Election: 2014
Kleinhendler, Howard, , ,	,	rimary
		General
Mailing Address 8 Cabinfield Circle		Other (specify) ▼
City	State	ZIP Code X Personal Funds of the Candidate
Lakewood	NJ	08701
Original Amount of Loan	Cumulative Pa	ment To Date Balance Outstanding at Close of This Period
5000.00		0.00
TERMS Date Incurred	С	ate Due Interest Rate Secured: (If none, enter 0)
M03M / D31D / Y 2014 Y	M M / D D	/
List All Endorsers or Guarantors (if any) t	to Loan Source	
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	<u>.</u>	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional)		0.00
TOTALS This Period (last page in this line only	y)	
Carry outstanding balance only to LINE 3, Sc	hedule D, for this	s line. If no Schedule D, carry forward to appropriate line of Summary.

: 97 'A = G7 9 @ G B9 CI G'H9 LH F9 @ 5 H9 8 'HC '5 'F9 DC FHZ G7 < 98 I @ 'C F' + H9 A = N5 H= C B

Form/Schedule: SC/10 Transaction ID: SC/10.4111

(Current loan amount of 5000.00 from a balance of 5000.00 has been forgiven)

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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13a 13b

OF

_						130	
	ME OF COMMITTEE (In Full) leinhendler For Congress				Transa	action ID : SC/10.4174	
	LOAN SOURCE Full Name (Last, Kleinhendler, Howard, , ,	First, Mic	ddle Initial)		☐ Memo Iten	x Primary	
	Mailing Address 8 Cabinfield Circle					General Other (specify) ▼	
	City		State ZIP Code		de	Personal Funds of the Candidate	
	Lakewood NJ			08701			
	Original Amount of Loan		Cumulative Pay	yment To		lance Outstanding at Close of This Period	
	8000	0.00			0.00	0.00	
	TERMS Date Incurred		C	Date Due	Interest Ra (If none, ent		
	M04 ^M / D14 ^D / Y Ž014	Y	M M / D D	/ Y	11/30/14	0.00 % (apr) Yes X No	
	List All Endorsers or Guarantors	` ,	o Loan Source				
	1. Full Name (Last, First, Middle I	nitial)			Name of Employer		
	Mailing Address				Occupation		
	City	State	ZIP Code		Amount Guaranteed Outstanding:	9 9	
	2. Full Name (Last, First, Middle In	itial)			Name of Employer		
	Mailing Address				Occupation Amount Guaranteed		
	0:1	0	710 0 1				
	City	State	ZIP Code			, , , , , , , , , , , , , , , , , , , ,	
	3. Full Name (Last, First, Middle In	itial)			Name of Employer Occupation		
	Mailing Address						
	City	State	ZIP Code		Amount Guaranteed		
	4. Full Name (Last, First, Middle In				Outstanding: Name of Employer	9 9	
	<u> </u>	itiai)			. ,		
	Mailing Address				Occupation		
	City	State	ZIP Code		Amount Guaranteed Outstanding:	9 9	
SI	UBTOTALS This Period This Page (optional)				0.00	
	OTALS This Period (last page in this					0.00	
						7 7	
C	carry outstanding balance only to LI	NE 3, Sch	edule D, for this	s line. If	no Schedule D, carry for	rward to appropriate line of Summary.	

: 97 A = G7 9 @ G B9 C I G H9 L H F 9 @ 5 H9 8 HC 5 F 9 D C F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: SC/10 Transaction ID: SC/10.4174

(Current loan amount of 8000.00 from a balance of 8000.00 has been forgiven)

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 20 FOR LINE NUMBER: (check only one)

X 13a

OF

_						130	
	ME OF COMMITTEE (In Full) leinhendler For Congress				Transa	action ID : SC/10.4175	
	LOAN SOURCE Full Name (Last, Kleinhendler, Howard, , ,	First, Mic	ddle Initial)		☐ Memo Iten	x Primary	
	Mailing Address 8 Cabinfield Circle					General Other (specify) ▼	
	City		State ZIP Code		de	✗ Personal Funds of the Candidate	
Lakewood			NJ	08701			
	Original Amount of Loan Cumulative Payment 7				0.00	lance Outstanding at Close of This Period 0.00	
	TERMS Date Incurred			Date Due	Interest Ra (If none, ent		
	M04 ^M / D30 ^D / Y Ž014	Y	M M / D D	/ Y	, ,	0.00	
	List All Endorsers or Guarantors	(if any) to	o Loan Source				
	1. Full Name (Last, First, Middle I	nitial)			Name of Employer		
	Mailing Address				Occupation		
	City	State	ZIP Code		Amount Guaranteed Outstanding:	7	
	2. Full Name (Last, First, Middle In	itial)			Name of Employer		
	Mailing Address				Occupation Amount		
	City	State	ZIP Code		Guaranteed Outstanding:	y	
	3. Full Name (Last, First, Middle In	itial)			Name of Employer Occupation		
	Mailing Address						
	City	State	ZIP Code		Amount Guaranteed Outstanding:	7	
	4. Full Name (Last, First, Middle In	itial)			Name of Employer		
	Mailing Address				Occupation		
					Amount		
	City	State	ZIP Code		Guaranteed Outstanding:	9	
SI	JBTOTALS This Period This Page (optional)				0.00	
TO	OTALS This Period (last page in this	s line only	·) ·······			7 7 8	
_	carry outstanding belones only to LU	NE 2 Col	nodulo D. for this	e line lf	no Sobodulo D. com: fo	guard to appropriate line of Summer.	
ı	arry outstanding palance only to Li	iv⊑ J, JCI	iedule D, lor (NIS	s iiiie. Iī	no schedule D, carry fol	rward to appropriate line of Summary.	

: 97 A = G7 9 @ G B9 C I G H9 L H F 9 @ 5 H9 8 HC 5 F 9 D C F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: SC/10 Transaction ID: SC/10.4175

(Current loan amount of 8000.00 from a balance of 8000.00 has been forgiven)

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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OF

		130
NAME OF COMMITTEE (In Full) Kleinhendler For Congress		Transaction ID : SC/10.4176
LOAN SOURCE Full Name (Last, First, I	Middle Initial)	☐ Memo Item
Mailing Address 8 Cabinfield Circle		General Other (specify) ▼
City	State	ZIP Code Personal Funds of the Candidate
Lakewood	NJ	08701
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
25000.00		0.00
TERMS Date Incurred]	Date Due Interest Rate Secured: (If none, enter 0)
M05 ^M / D14 ^D / Y Ž01¾ Y	M M / D D	0.00
List All Endorsers or Guarantors (if any) to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
011	710.0.1	Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
4. Full Name (Last, First, Middle Initial)	•	Name of Employer
Mailing Address		Occupation
011	710.0.1	Amount Guaranteed
City	ZIP Code	Outstanding:
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CODICIALS THIS FEHOU THIS Fage (options		0.00
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Carry outstanding balance only to LINE 3,	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

: 97 A = G7 9 @ G B9 C I G H9 L H F 9 @ 5 H9 8 HC 5 F 9 D C F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: SC/10 Transaction ID: SC/10.4176

(Current loan amount of 25000.00 from a balance of 25000.00 has been forgiven)

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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OF

		130
NAME OF COMMITTEE (In Full) Kleinhendler For Congress		Transaction ID : SC/10.4199
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2014
Kleinhendler, Howard, , ,		x Primary
Mailing Address 8 Cabinfield Circle		General Other (specify) ▼
City	State	ZIP Code Personal Funds of the Candidate
Lakewood	NJ	08701
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
7000.00		0.00
TERMS Date Incurred	[Date Due Interest Rate Secured:
^M 05 ^M / ^D 21 ^D / Y Ž014 Y	M M / D D	0.00
List All Endorsers or Guarantors (if any) to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
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COSTOTALO TINO I ENOU TINO Page (optiona		0.00
TOTALS This Period (last page in this line o	nly)	······································
Carry outstanding balance only to LINE 3, S	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

: 97 'A - G7 9 @ 5 B9 CI G'H9 LH F9 @ 5 H98 'HC '5 'F9 DC F H Z G7 < 98 I @ 'C F' + H9 A - N5 H-C B

Form/Schedule: SC/10 Transaction ID: SC/10.4199

(Current loan amount of 7000.00 from a balance of 7000.00 has been forgiven)

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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OF

_						100			
	ME OF COMMITTEE (In Full) leinhendler For Congress				Transa	action ID : SC/10.4200			
	LOAN SOURCE Full Name (Last, Kleinhendler, Howard, , ,	First, Mic	☐ Memo Iten	x Primary					
	Mailing Address 3 Cabinfield Circle					General Other (specify) ▼			
	City		State NJ	ZIP Co 08701	de	✗ Personal Funds of the Candidate			
	Lakewood		1			lance Outstanding at Class of This Davis			
	Original Amount of Loan 5000	0.00			ance Outstanding at Close of This Period				
	TERMS Date Incurred		Date Due Interest Rate (If none, enter						
	^M 05 ^M / ^D 27 ^D / Y Ž014	M M / D D	/ Y	, ,	0.00				
	List All Endorsers or Guarantors	(if any) to	o Loan Source						
	1. Full Name (Last, First, Middle I	nitial)	Name of Employer						
	Mailing Address				Occupation				
	City	State	ZIP Code		Amount Guaranteed Outstanding:	7			
	2. Full Name (Last, First, Middle Initial)				Name of Employer				
	Mailing Address				Occupation				
				Amount					
	City	State	ZIP Code		Guaranteed Outstanding:	y			
	3. Full Name (Last, First, Middle Initial)				Name of Employer				
	Mailing Address				Occupation				
	City	State	ZIP Code		Amount Guaranteed Outstanding:	7			
	4. Full Name (Last, First, Middle Initial)				Outstanding: Name of Employer				
	Mailing Address			Occupation					
				Amount					
	City	State	ZIP Code		Guaranteed Outstanding:	7 7			
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_	carry outstanding belongs only to LU	NE 2 Col	nodulo D. for this	e line If	no Sobodulo D. com: fo	guard to appropriate line of Summer.			
ı C	arry outstanding palance only to Li	ıv⊑ J, SCr	iedule D, for this	s ime. If	וט סטוופטעופ ש, carry tol	rward to appropriate line of Summary.			

: 97 'A = G7 9 @ G B9 C I G'H9 L H'F9 @ 5 H98 'HC'5 'F9 DCF HZ'G7 < 98 I @ 'CF' ± H9 A ± N5 H± C B

Form/Schedule: SC/10 Transaction ID: SC/10.4200

(Current loan amount of 5000.00 from a balance of 5000.00 has been forgiven)

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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OF

_						130			
	ME OF COMMITTEE (In Full) leinhendler For Congress				Transa	action ID : SC/10.4201			
	LOAN SOURCE Full Name (Last, Kleinhendler, Howard, , ,	First, Mic	☐ Memo Iter	x Primary					
	Mailing Address 8 Cabinfield Circle					General Other (specify) ▼			
	City		State	ZIP Co 08701	de	Personal Funds of the Candidate			
Lakewood									
	Original Amount of Loan Cumu 950.00			yment To	0.00	ance Outstanding at Close of This Period 0.00			
	TERMS Date Incurred	Date Due Interest Rate (If none, enter							
	M05M / D29D / Y Ž014 Y			/ Y	11)/30/14 Y	0.00 % (apr) Yes X No			
	List All Endorsers or Guarantors	(if any) to	o Loan Source						
	1. Full Name (Last, First, Middle I			Name of Employer					
	Mailing Address			Occupation					
	City	State	ZIP Code		Amount Guaranteed Outstanding:	7			
	2. Full Name (Last, First, Middle Initial)				Name of Employer				
	Mailing Address				Occupation				
				Amount					
	City	State	ZIP Code		Guaranteed Outstanding:	9 9 9			
	3. Full Name (Last, First, Middle Initial)				Name of Employer				
	Mailing Address				Occupation				
	City	State	ZIP Code		Amount Guaranteed Outstanding:	9			
	4. Full Name (Last, First, Middle Initial)				Name of Employer				
	Mailing Address			Occupation					
				Amount					
	City	State	ZIP Code		Guaranteed Outstanding:	7 7 7			
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_	carry outstanding belongs only to LU	NE 2 Sal	nodulo D. for this	e line If	no Sobodulo D. corre fo	rward to appropriate line of Summer.			
ı C	arry outstanding palance only to Li	ıv⊑ J, SCN	iedule D, for this	s ime. If	no achedule D, carry to	rward to appropriate line of Summary.			

: 97 A = G7 9 @ G B9 C I G H9 L H F 9 @ 5 H9 8 HC 5 F 9 D C F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: SC/10 Transaction ID: SC/10.4201

(Current loan amount of 950.00 from a balance of 950.00 has been forgiven)

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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				Detailed ou	minary r age	,		13b				
AME OF COMMITTEE (In Full) Kleinhendler For Congres:	6				Transacti	ion ID : SC/10.4202						
LOAN SOURCE Full Name (Las Kleinhendler, Howard, , Mailing Address 8 Cabinfield Circle		_ N	Memo Item	Election: 2014 ** Primary General Other (specify)								
City Lakewood		State NJ	ZIP Cod 08701	е		Personal Funds of t	the Can	didate				
Original Amount of Loan Cumulative Payment 5000.00				Date 0.00	Balan	lance Outstanding at Close of This Period						
TERMS Date Incurred	4 " Y	M M / D D	Date Due		nterest Rate f none, enter (0.0	0)	eured:	x No				
List All Endorsers or Guaranto		o Loan Source										
1. Full Name (Last, First, Middle	e Initial)			Name of Emplo	oyer							
Mailing Address	Mailing Address				Occupation							
City	State	ZIP Code		Amount Guaranteed Outstanding:		y						
2. Full Name (Last, First, Middle	2. Full Name (Last, First, Middle Initial)					Name of Employer						
Mailing Address				Occupation								
City	State	ZIP Code		Amount Guaranteed Outstanding:		9 9 9						
3. Full Name (Last, First, Middle		Name of Employer										
Mailing Address				Occupation								
City	State	ZIP Code		Amount Guaranteed Outstanding:		7 7						
4. Full Name (Last, First, Middle Initial)				Name of Employer								
Mailing Address	Occupation											
City	State	ZIP Code		Amount Guaranteed Outstanding:		7 7 7 7						
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Carry outstanding balance only to	LINE 3. Sci	nedule D. for this	s line. If n	o Schedule D.	carry forwa	ard to appropriate line o	f Sumr	narv.				

: 97 'A = G7 9 @ G B9 C I G'H9 L H'F9 @ 5 H98 'HC'5 'F9 DCF HZ'G7 < 98 I @ 'CF' ± H9 A ± N5 H± C B

Form/Schedule: SC/10 Transaction ID: SC/10.4202

(Current loan amount of 5000.00 from a balance of 5000.00 has been forgiven)